## STATEMENT OF

RECEIVED

FORM 1		ORGANIZATION		7	DIZ AUG 13 AM 8:22
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example:If typing, tyover the lines.	12FE4M5	CENTER
CATHY M	CMOF	RRIS RODGE	RS FOR CON	IGRESS	
ADDRESS (number a	nd street)	BOX 137		111111	
(Check if address is changed)		SPOKANE		WA	99210 -0137
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA	address	SS (Please provide only one petersdrp@r	e-mail address) <b>ՈՏՈ.COM</b>		
COMMITTEE'S WEE	PAGE ADI	DRESS (URL)	gradien er en skrive. Gradien er en skriver		ing programme and the second s
(Check if is change					
2. DATE <b>Ö</b> E	7	2012			. '
3. FEC IDENTIFIC	CATION NU	JMBER C	0390476	]	
4. IS THIS STATE	MENT _	NEW (N) OR	AMENDE	D (A)	
I certify that I have	examined th	is Statement and to the be	est of my knowledge and	belief it is true, correc	t and complete.
Type or Print Name	of Treasure	DON PETE	RS		
Signature of Treasure		Amfeter		Date 08	07 2012
NOTE: Submission of		ous, or incomplete information			the penalties of 2 U.S.C. §437g.
Office Use	i ari d		For further information (Folly, Free 800-424	Commission	FEC FORM 1 (Revised 02/2009)